

<b>United States Bankruptcy Court Northern District of Illinois</b>						<b>Voluntary Petition</b>																					
Name of Debtor (if individual, enter Last, First, Middle): <b>Matus, Mark Thomas</b>				Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Matus, Karen Lynn</b>																							
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>None</b>				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>None</b>																							
Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): <b>5222</b>				Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): <b>3409</b>																							
Street Address of Debtor (No. and Street, City, and State) <b>269 Terry Court Woodstock, IL</b>				Street Address of Joint Debtor (No. and Street, City, and State) <b>269 Terry Court Woodstock, IL</b>																							
ZIPCODE <b>60098</b>				ZIPCODE <b>60098</b>																							
County of Residence or of the Principal Place of Business: <b>Mchenry</b>				County of Residence or of the Principal Place of Business: <b>Mchenry</b>																							
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):																							
ZIPCODE				ZIPCODE																							
Location of Principal Assets of Business Debtor (if different from street address above):						ZIPCODE																					
<b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below)  _____		<b>Nature of Business</b> (Check <b>one</b> box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  _____ <b>Tax-Exempt Entity</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																							
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Check one box: Chapter 11 Debtors</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000 <b>Check all applicable boxes</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one of more classes, in accordance with 11 U.S.C. § 1126(b).																									
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.  <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						<b>THIS SPACE IS FOR COURT USE ONLY</b>																					
<b>Estimated Number of Creditors</b> <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;">1- 49</td><td style="text-align: center;">50- 99</td><td style="text-align: center;">100- 199</td><td style="text-align: center;">200- 999</td><td style="text-align: center;">1000- 5000</td><td style="text-align: center;">5,001- 10,000</td><td style="text-align: center;">10,001- 25,000</td><td style="text-align: center;">25,001- 50,000</td><td style="text-align: center;">50,001- 100,000</td><td style="text-align: center;">OVER 100,000</td></tr><tr><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr></table>								1- 49	50- 99	100- 199	200- 999	1000- 5000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1- 49	50- 99	100- 199	200- 999	1000- 5000	5,001- 10,000			10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000																
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<b>Estimated Assets</b> <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"><input type="checkbox"/> \$0 to \$10,000</td><td style="text-align: center;"><input type="checkbox"/> \$10,000 to \$100,000</td><td style="text-align: center;"><input checked="" type="checkbox"/> \$100,000 to \$1 million</td><td style="text-align: center;"><input type="checkbox"/> \$1 million to \$100 million</td><td style="text-align: center;"><input type="checkbox"/> More than \$100 million</td></tr></table>						<input type="checkbox"/> \$0 to \$10,000	<input type="checkbox"/> \$10,000 to \$100,000	<input checked="" type="checkbox"/> \$100,000 to \$1 million	<input type="checkbox"/> \$1 million to \$100 million	<input type="checkbox"/> More than \$100 million																	
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<b>Estimated Liabilities</b> <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"><input type="checkbox"/> \$0 to \$50,000</td><td style="text-align: center;"><input type="checkbox"/> \$50,000 to \$100,000</td><td style="text-align: center;"><input checked="" type="checkbox"/> \$100,000 to \$1 million</td><td style="text-align: center;"><input type="checkbox"/> \$1 million to \$100 million</td><td style="text-align: center;"><input type="checkbox"/> More than \$100 million</td></tr></table>						<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,000 to \$100,000	<input checked="" type="checkbox"/> \$100,000 to \$1 million	<input type="checkbox"/> \$1 million to \$100 million	<input type="checkbox"/> More than \$100 million																	
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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		<b>Document Page 2 of 54</b> Name of Debtor(s): <b>Mark Thomas Matus &amp; Karen Lynn Matus</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:	
Location Where Filed: <b>N.A.</b>	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> <u>/s/ Scott A. Bentley</u>                          Signature of Attorney for Debtor(s)                     </div> <div> <u>24 July 2007</u>                          Date                     </div> </div>	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box) <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.                 </div> <div style="margin-top: 10px;"> <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.                 </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.                 </div>			
<b>Statement by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes) <div style="margin-top: 10px;"> <input type="checkbox"/> Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)   <div style="text-align: center; margin-bottom: 10px;">                         _____                          (Name of landlord or lessor that obtained judgment)                     </div> <div style="text-align: center;">                         _____                          (Address of landlord or lessor)                     </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Debtor claims that under applicable non bankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and                 </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.                 </div>			

<b>Document</b> Page 3 of 54	
<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>Mark Thomas Matus &amp; Karen Lynn Matus</b>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> <u>/s/ Mark Thomas Matus</u>          Signature of Debtor</p> <p><b>X</b> <u>/s/ Karen Lynn Matus</u>          Signature of Joint Debtor</p> <p>_____          Telephone Number (If not represented by attorney)</p> <p><u>24 July 2007</u>          Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative of a Recognized Foreign Proceedings</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition.</p> <p>(Check only <b>one</b> box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to § 1511 of title 11 United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><b>X</b> _____          (Signature of Foreign Representative)</p> <p>_____          (Printed Name of Foreign Representative)</p> <p>_____          (Date)</p>
<p style="text-align: center;"><b>Signature of Attorney</b></p> <p><b>X</b> <u>/s/ Scott A. Bentley</u>          Signature of Attorney for Debtor(s)  <b>SCOTT A. BENTLEY 6191377</b>          Printed Name of Attorney for Debtor(s)</p> <p>_____          Firm Name  <b>661 Ridgeview Drive</b>          Address  <b>McHenry, IL 60050</b></p> <p><u>815-385-0669</u>          Telephone Number  <u>24 July 2007</u>          Date</p>	<p style="text-align: center;"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.</p> <p>_____          Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____          Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____          Address</p> <p><b>X</b> _____          Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</i></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> _____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p>_____          Date</p>	

Official Form 1, Exhibit D (10/06)

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois**

In re Mark Thomas Matus & Karen Lynn Matus  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

**Official Form 1, Exh. D (10/06) – Cont.**

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.]* *[Summarize exigent circumstances here.]* \_\_\_\_\_

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**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Mark Thomas Matus  
MARK THOMAS MATUS

Date: 24 July 2007

Official Form 1, Exhibit D (10/06)

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois**

In re Mark Thomas Matus & Karen Lynn Matus  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

**Official Form 1, Exh. D (10/06) – Cont.**

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.]* *[Summarize exigent circumstances here.]* \_\_\_\_\_

---

**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Joint Debtor: /s/ Karen Lynn Matus  
KAREN LYNN MATUS

Date: 24 July 2007

## **FORM 6. SCHEDULES**

### Summary of Schedules

Schedule A - Real Property  
Schedule B - Personal Property  
Schedule C - Property Claimed as Exempt  
Schedule D - Creditors Holding Secured Claims  
Schedule E - Creditors Holding Unsecured Priority Claims  
Schedule F - Creditors Holding Unsecured Nonpriority Claims  
Schedule G - Executory Contracts and Unexpired Leases  
Schedule H - Codebtors  
Schedule I - Current Income of Individual Debtor(s)  
Schedule J - Current Expenditures of Individual Debtor(s)

### Unsworn Declaration under Penalty of Perjury

**GENERAL INSTRUCTIONS:** The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.



In re Mark Thomas Matus & Karen Lynn Matus  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Debtor's Residence 269 Terry Court Woodstock, IL 60098	Fee Simple	J	170,000.00	116,869.67
Total ➤			170,000.00	

(Report also on Summary of Schedules.)

In re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account # TCF National Bank 410 S. Eastwood Woodstock, IL 60098	H	934.00
		Checking Account # Guaranty Bank 1819 E. Geneva Street Delavan, WI 53115	W	300.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Miscellaneous household goods and furnishings	J	2,130.00
5. Books, Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Miscellaneous books, pictures, etc.	J	175.00
6. Wearing apparel.		Miscellaneous wearing apparel	J	200.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.		Miscellaneous sports equipment	J	175.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

In re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE B - PERSONAL PROPERTY

### (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Retirement Account LaSalle Bank, NA 135 S. LaSalle Street Chicago, IL 60603	H	5,284.95
		Profit Sharing Plan M & R Printing Profit Sharing Plan	H	30,375.90
		401K Sears Holdings 401K Savings PO Box 56287 Jacksonville, FL 32291-6287	H	13,318.10
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			

In re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2001 Pontiac Montana	J	6,080.00
		1996 Oldsmobile 88	J	1,680.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Computer & Printer	J	180.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached Total				\$ 60,832.95

(Include amounts from any continuation  
sheets attached. Report total also on  
Summary of Schedules.)

In re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

☐ 11 U.S.C. § 522(b)(2)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Debtor's Residence	(Husb)735 I.L.C.S 5§12-901 (Wife)735 I.L.C.S 5§12-901	15,000.00 15,000.00	170,000.00
Checking Account #	(Husb)735 I.L.C.S 5§12-1001(b)	934.00	934.00
Checking Account #	(Wife)735 I.L.C.S 5§12-1001(b)	300.00	300.00
Miscellaneous household goods and furnishings	(Husb)735 I.L.C.S 5§12-1001(b) (Wife)735 I.L.C.S 5§12-1001(b)	1,065.00 1,065.00	2,130.00
Miscellaneous books, pictures, etc.	(Husb)735 I.L.C.S 5§12-1001(b) (Wife)735 I.L.C.S 5§12-1001(b)	87.50 87.50	175.00
Miscellaneous wearing apparel	(Husb)735 I.L.C.S. Ch. 12-1001(a) (Wife)735 I.L.C.S. Ch. 12-1001(a)	100.00 100.00	200.00
Miscellaneous sports equipment	(Husb)735 I.L.C.S 5§12-1001(b) (Wife)735 I.L.C.S 5§12-1001(b)	87.50 87.50	175.00
Retirement Account	(Husb)735 I.L.C.S 5§12-1006	5,284.95	5,284.95
Profit Sharing Plan	(Husb)735 I.L.C.S 5§12-1006	30,375.90	30,375.90
401K	(Husb)735 I.L.C.S 5§12-1006	13,318.10	13,318.10
2001 Pontiac Montana	(Wife)735 I.L.C.S 5§12-1001(c)	2,400.00	6,080.00
1996 Oldsmobile 88	(Wife)735 I.L.C.S 5§12-1001(c)	1,680.00	1,680.00
Computer & Printer	(Husb)735 I.L.C.S 5§12-1001(b) (Wife)735 I.L.C.S 5§12-1001(b)	90.00 90.00	180.00

Official Form 6D (10/06)

In re Mark Thomas Matus & Karen Lynn Matus,

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C §112. If a "minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0062009607	J	Lien: 1st Mortgage				116,869.67	0.00
Harris Mortgage Loan PO Box 6148 Carol Stream, IL 60197-6148		Security: Debtors' Residence					
		VALUE \$ 170,000.00					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
Subtotal (Total of this page)						\$ 116,869.67	\$ 0.00
Total (Use only on last page)						\$ 116,869.67	\$ 0.00

0 continuation sheets attached

(Report total also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6E (4/07)

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Official Form 6E (4/07) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached



## Official Form 6F (10/06)

In re Mark Thomas Matus & Karen Lynn Matus,

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. C283725 AAMS o/b/o Centegra Health System PO Box 65576 Des Moines, IA 50265	W	Consideration: Medical services				1,313.75
ACCOUNT NO. 182833031 Allied Interstate o/b/o Sprint PO BOX 361477 Columbus, OH 432136-4177		Consideration: cellular service				Notice Only
ACCOUNT NO. 80260421 Americollect o/b/o Mercy Health Physicians 814 S. 8th Street Manitowoc, WI 54220-4503	H	Consideration: Medical services				48.00
ACCOUNT NO. 1050032100183 Anesthesia Associates of Woodstock 641 E. Butterfield Road #907 Lombard, IL 60148	W	Consideration: Medical services				594.00
12 continuation sheets attached						Subtotal ➤ \$ 1,955.75
						Total ➤ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. MC2-1139013-435 Associated Collectors o/b/o Mercy Health System 13 W. Milwaukee St. POB OX 1039 Janesville, WI 53547-1039	W	Consideration: Medical services				Notice Only
ACCOUNT NO. 5121075007086767 Associated Recovery Systems o/b/o Sears PO Box 469099 Escondido CA 92046-9099		Consideration: Credit card debt				Notice Only
ACCOUNT NO. DB1115 At Credit Services, LLC o/b/o Mercy Assisted Care 126 Second Street #106 Hudson, WI 54016	H	Consideration: Medical services				309.84
ACCOUNT NO. 259528 Automated Accounts Mgmt o/b/o Centegra Health System 4800 Mills Civil Parkway W. Des Moines, IA 50265-5263	H	Consideration: Medical services				40.00
ACCOUNT NO. 05-16537-0 Baker, Miller, Markoff & Krasny o/b/o Discover Financial 29 N. Wacker Dr, 5th Floor Chicago, IL 60606-3221	H	Consideration: Credit card debt				12,016.06

Sheet no. 1 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 12,365.90

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5490990078086913 Bank of America PO BOX 15726 Wilmington DE 19886-5726	H	Consideration: Credit card debt				8,552.25
ACCOUNT NO. 540990997374937 Bank of America/MBNA PO Box 17054 Wilmington DE 19884	H	Consideration: Credit card debt				9,208.00
ACCOUNT NO. 7103681 Capital Credit Service o/b/o Mariter Hospital 2509 S. Stoughton Road Madison, WI 53716-0545	W	Consideration: Medical services				Notice Only
ACCOUNT NO. 7022545 Capital Credit Services o/b/o Meriter Hospital PO Box 6250 Madison, WI 53716	W	Consideration: Medical services				370.99
ACCOUNT NO. 4417122375276156 Cardmember Service Chase PO Box 50882 Henderson NV 89016-0882	H	Consideration: Credit card debt				10,682.49

Sheet no. 2 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal	\$ 28,813.73
Total	\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4417122375276156 Cardmember Service Chase 400 Brooks Edge Blvd. Westerville, OH 43801	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. A0532200237 & A04508300272 Centegra Memorial Medical Center PO BOX 1990 Woodstock, IL 60098-1990	W	Consideration: Medical services				1,353.75
ACCOUNT NO. 3836688 Client Services o/b/o First USA 3451 Harry Truman Blvd. St. Charles, IL 63301-4047	W	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 13415544 Credit Management Services o/b/o Mercy Assisted Care PO Box 931 Brookfield, WI 53006-0931		Consideration: Medical services				Notice Only
ACCOUNT NO. 2031640071 Creditors Protection Service o/b/o Rockford Clinic 202 W. State Street, Ste 300 Rockford, IL 61101	H	Consideration: Medical services				682.09

Sheet no. 3 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 2,035.84

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	W	Consideration: Medical services				Notice Only
Creditors Protection Service o/b/o Rockford Clinic 202 W. State Street, Ste 300 Rockford, IL 61101						
ACCOUNT NO. 621390	J	Consideration: Medical services				210.00
Early Invervention PO Box 409168 Chicago, Il 60640						
ACCOUNT NO. 2363105		Consideration: Overdraft Account				1,028.47
First Financial Resources o/b/o Harris Bank 1001 Worchester Road Farmington, MA 01703						
ACCOUNT NO.	J	Consideration: Credit card debt				10,682.49
First USA PO Box 15153 Wilmington, DE 19886-5153						
ACCOUNT NO.	W	Consideration: Credit card debt				5,720.44
First USA PO Box 15153 Wilmington, DE 19886-5153						

Sheet no. 4 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 17,641.40

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 11196126 Franks, Gerkin & McKenna o/b/o First USA Platinum PO Box 5 Marengo, IL 60152	J	Consideration: Credit card debt				10,682.49
ACCOUNT NO. 2015298 H&R Accounts o/b/o Centegra Memorial Medical Center 7017 John Deere Parkway Moline, IL 61265		Consideration: Medical services				Notice Only
ACCOUNT NO. 2363105 Harris Bank PO Box 5038 Rolling Meadows, IL 60008		Consideration: Account Overdraft				811.58
ACCOUNT NO. 404-1-000663640 Lake/McHenry Pathology Associates 520 E. 22nd Street Lombard, IL 60148	W					194.00
ACCOUNT NO. 4417122375276145 Leading Edge Recovery Solutions o/b/o Bank One 5440 N. Cumberland Avenue Ste 300 Chicago, IL 60656-1490	H	Consideration: Credit card debt				10,682.49

Sheet no. 5 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 22,370.56

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	H	Consideration: Credit card debt				42.71
LTD Commodities, LLC o/b/o Household Bank PO Box 702 Bannockburn, IL 60015-0702						
ACCOUNT NO.		Consideration: Credit card debt				Notice Only
LVNV FUNDing, LLC o/b/o Sears PO Box 10497 Greenville, SC 29603-0584						
ACCOUNT NO.	W	Consideration: Medical services				43,605.90
Mariter Hospital Drawer 915 Milwaukee, WI 53270						
ACCOUNT NO. 5490990078086913	H	Consideration: Credit card debt				8,552.25
MBNA America Platinum Plus PO Box 15287 Wilmington, DE 19886-5019						
ACCOUNT NO. J034996	H	Consideration: Medical services				53.17
Mercy Assisted Car 1010 N. Washington Street Janesville, WI 53548						

Sheet no. 6 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 52,254.03

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. K004998 Mercy Assisted Car 1010 N. Washington Street Janesville, WI 53548	W	Consideration: Medical services				276.45
ACCOUNT NO. Mercy Health System PO Box 5177 Janesville, WI 53547-5177	W	Consideration: Medical services				403.86
ACCOUNT NO. 8026-0421 MHS PO Box 5081 Janesville, WI 53547	W	Consideration: Medical services				304.04
ACCOUNT NO. MN1901246000730 Moraine Emergency Physicians PO BOX 8759 Philadelphia, PA 19101-8759	H	Consideration: Medical services				187.00
ACCOUNT NO. MN1905322002379 Moraine Emergency Physicians PO BOX 8759 Philadelphia, PA 19101-8759	W	Consideration: Medical services				443.00

Sheet no. 7 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 1,614.35

Total > \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04863249 National Enterprise Systems o/b/o Sears Mastercard 29125 Solon Road Solon, OH 44139-3442		Consideration: Credit card debt				Notice Only
ACCOUNT NO. XGH662 NCO o/b/o Moraine Emer. Physic. PO BOX 8547 Philadelphia, P A19101	W	Consideration: Medical services				399.00
ACCOUNT NO. NQD021620021985 North Shore Agency o/b/o Bottom Line Books PO Box 11067 Des Moines, IA 50336	W	Consideration: Subscription				33.90
ACCOUNT NO. 1040000156485 Northwest Imaging Associates 641 E. Butterfield Road Lombard, IL 60148	W	Consideration: Medical services				188.00
ACCOUNT NO. 5566260-0508300272 OSI o/b/o Centegra Memorial Medical Center 1375 E. Woodfield Road, Ste 110 Schaumburg, IL 60173-5447		Consideration: Medical services				Notice Only

Sheet no. 8 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 620.90

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 64755051-90532220023379 OSI o/b/o Moraine ER Physicians 1375 E. Woodfield Road, Ste 110 Schaumburg, IL 60173-5447		Consideration: Medical services				443.00
ACCOUNT NO. 587155710-6-351-096-74000 OSI o/b/o Woodstock Imaging 1375 E. Woodfield Drive Schaumburg, IL 60173		Consideration: Medical services				Notice Only
ACCOUNT NO. 02080152 Park Dansan o/b/o Sprint 113 W. Third Avenue Gastonia, NC 28053	H	Consideration: Cellular Service				32.02
ACCOUNT NO. 4426036 Professional Account Mgmt. o/b/o City of Crystal Lake PO BOX 397 Milwaukee, WI 53201	H	Consideration: Parking Ticket				50.00
ACCOUNT NO. 11830601 Rockford Clinic 2300 N. Rockton Avenue Rockford, IL 61103	W	Consideration: Medical services				682.09

Sheet no. 9 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 1,207.11

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 93620492991xxxx Sallie Mae 1002 Arthur Drive Lynn Haven, FL 32444-1683	H	Consideration: Student Loan				10,492.00
ACCOUNT NO. 5121075007086767 Sears PO BOX 6189 Sioux Falls, SD 57117	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 5121-0750-0708-6767 Sears Gold Mastercard PO Box 182156 Columbus, OH 43218	H	Consideration: Credit card debt				11,227.66
ACCOUNT NO. 3811401 State Collection Service o/b/o Mariter Hospital PO Box 6250 Madison, WI 53716		Consideration: Credit card debt				Notice Only
ACCOUNT NO. see remaerks State Collections o/b/o University of WI, Meriter Hospital & UW Medical Foundation 2509 S. Stoughton Rd. Madison, WI 53716	J	Consideration: Medical services UW Hospital - \$6390750, Meriter, 4905711, 4668300 UW Medical Foundation, 6117083, 5996471				2,441.86

Sheet no. 10 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 24,161.52

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 105611 The Center for Neurology 750 E. Terra Cotta Avenue Suite A Crystal Lake, IL 60014	H	Consideration: Medical services				1,495.94
ACCOUNT NO. SAR119 Unifund 10625 Techwood Circle Cincinnati, OH 45242-2846						6,421.00
ACCOUNT NO. H-58402528511 University of Wisconsin HCA 600 Highland Avenue Madison, WI 53792	W	Consideration: Medical services				218.80
ACCOUNT NO. 1047863 UW Health Physicians 8007 Excelsior Madison, WI 53717	W	Consideration: Medical services				331.00
ACCOUNT NO. 004143440-03-4004 Valentine & Kebartas, Inc. o/b/o Chase aka Bank One PO Box 325 Lawrence, MA 01842-0625		Consideration: Credit card debt				Notice Only

Sheet no. 11 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 8,466.74

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re Mark Thomas Matus & Karen Lynn Matus,  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. P1472850 VW Health Physicians PO Box 2978 Milwaukee WI 53201	J	Consideration: Medical services				179.00
ACCOUNT NO. 011722 Well Care Neonatologists PO Box 360 South Elgin, IL 60177	W	Consideration: Medical services				425.00
ACCOUNT NO. Woodstock Imaging 520 E. 22nd St. Lombard, IL 60148	H	Consideration: Medical services				75.00
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 12 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$ 679.00

Total ▶ \$ 174,186.83

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Mark Thomas Matus & Karen Lynn Matus Case No. \_\_\_\_\_  
Debtor (if known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re   Mark Thomas Matus & Karen Lynn Matus

Debtor

Case No.   \_\_\_\_\_

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child." See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Official Form 6I (10/06)

In re Mark Thomas Matus & Karen Lynn MatusCase \_\_\_\_\_  
(if known)

Debtor

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status: <u>Married</u>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <u>daughter, son</u>	AGE(S): <u>5, 3</u>
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<u>CNC Programmer</u>	<u>Teacher (on medical leave)</u>
Name of Employer	<u>Laserage Technology Corporation</u>	<u>Wisconsin School for the Deaf</u>
How long employed	<u>1.5 years</u>	
Address of Employer	<u>3021 Delany Road</u>	<u>309 W. Walworth</u>
	<u>Waukegan, IL 60085</u>	<u>Delavan, WI 53115</u>

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions

(Prorate if not paid monthly.)

DEBTOR	SPOUSE
\$ <u>2,731.45</u>	\$ <u>0.00</u>

2. Estimated monthly overtime

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

3. SUBTOTAL

\$ <u>2,731.45</u>	\$ <u>0.00</u>
--------------------	----------------

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union Dues

d. Other (Specify: \_\_\_\_\_)

\$ <u>317.72</u>	\$ <u>0.00</u>
\$ <u>0.00</u>	\$ <u>0.00</u>
\$ <u>0.00</u>	\$ <u>0.00</u>
\$ <u>0.00</u>	\$ <u>0.00</u>

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <u>317.72</u>	\$ <u>0.00</u>
------------------	----------------

6.. TOTAL NET MONTHLY TAKE HOME PAY

\$ <u>2,413.73</u>	\$ <u>0.00</u>
--------------------	----------------

7. Regular income from operation of business or profession or farm

(Attach detailed statement)

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

8. Income from real property

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

9. Interest and dividends

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

11. Social security or other government assistance

(Specify) \_\_\_\_\_

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

12. Pension or retirement income

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

13. Other monthly income (S)Income Continuation Insurance

(Specify) \_\_\_\_\_

\$ <u>0.00</u>	\$ <u>2,312.50</u>
----------------	--------------------

\$ <u>0.00</u>	\$ <u>0.00</u>
----------------	----------------

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <u>0.00</u>	\$ <u>2,312.50</u>
----------------	--------------------

15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)

\$ <u>2,413.73</u>	\$ <u>2,312.50</u>
--------------------	--------------------

16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15.)

\$ <u>4,726.23</u>	
--------------------	--

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None



In re Mark Thomas Matus & Karen Lynn Matus Case No. \_\_\_\_\_  
Debtor (if known)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,352.15</u>
a. Are real estate taxes included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
b. Is property insurance included?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
2. Utilities: a. Electricity and heating fuel	\$	<u>250.00</u>
b. Water and sewer	\$	<u>39.00</u>
c. Telephone	\$	<u>72.00</u>
d. Other <u>garbage 17 cell 49 internet 25</u>	\$	<u>91.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>100.00</u>
4. Food	\$	<u>500.00</u>
5. Clothing	\$	<u>100.00</u>
6. Laundry and dry cleaning	\$	<u>10.00</u>
7. Medical and dental expenses	\$	<u>105.00</u>
8. Transportation (not including car payments)	\$	<u>400.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>10.00</u>
10. Charitable contributions	\$	<u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>46.00</u>
b. Life	\$	<u>0.00</u>
c. Health	\$	<u>1,073.00</u>
d. Auto	\$	<u>102.00</u>
e. Other	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify)	\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>0.00</u>
b. Other	\$	<u>0.00</u>
c. Other	\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other <u>School Loan</u>	\$	<u>105.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	\$	<u>4,355.15</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: <u>None</u>		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I (Includes spouse income of \$2,312.50. See Schedule I)	\$	<u>4,726.23</u>
b. Average monthly expenses from Line 18 above	\$	<u>4,355.15</u>
c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)	\$	<u>371.08</u>

Official Form 6 - Summary (10/06)

# United States Bankruptcy Court

Northern District of Illinois

In re Mark Thomas Matus & Karen Lynn Matus

Debtor

Case No. \_\_\_\_\_

Chapter 13

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 170,000.00		
B - Personal Property	YES	3	\$ 60,832.95		
C - Property Claimed as exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 116,869.67	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	13		\$ 174,186.83	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 4,726.23
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,355.15
<b>TOTAL</b>		25	\$ 230,832.95	\$ 291,056.50	

# United States Bankruptcy Court

Northern District of Illinois

In re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_

Debtor

Chapter 13

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

### State the Following:

Average Income (from Schedule I, Line 16)	\$ 4,726.23
Average Expenses (from Schedule J, Line 18)	\$ 4,355.15
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ 5,408.13

### State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 174,186.83
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 174,186.83

In re Mark Thomas Matus & Karen Lynn Matus Case No. Debtor (If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 27 sheets (total shown on summary page plus 2), and that they are true and correct to the best of my knowledge, information, and belief.

Date 24 July 2007 Signature: /s/ Mark Thomas Matus Debtor:

Date 24 July 2007 Signature: /s/ Karen Lynn Matus (Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X Signature of Bankruptcy Petition Preparer Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total shown on summary page plus 2), and that they are true and correct to the best of my knowledge, information, and belief.

Date Signature:

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

In Re Mark Thomas Matus & Karen Lynn Matus

Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2007(db)	6736.42	Employment
2006(db)	31462.11	Employment
2005(db)	9793.04	Employment
2007(jdb)	0	Disability Insurance
2006(jdb)	34414.00	Employment
2005(jdb)	1800.00	Employment

**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2007(db)	5291.66	Disability
2006(db)	1800.00	Disability
2005(jdb)	7296.00	Illinois Department of Employment Security
(jdb)		

None

☒

**3. Payments to creditors**

*Complete a. or b., as appropriate, and c.*

*a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None

☒

*b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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**4. Suits and administrative proceedings, executions, garnishments and attachments**

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Discover Bank v. Mark Matus, 06 AR 75	Collection Suit	McHenry County, Illinois	pending
Maximus Collections, as assignee of First USA Platinum, 06 SC 3600	Small Claims	McHenry County, Illinois	Judgment entered on 2/5/07

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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**5. Repossessions, foreclosures and returns**

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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**6. Assignments and Receiverships**

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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**8. Losses**

None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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**9. Payments related to debt counseling or bankruptcy**

None ☒ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**10. Other transfers**

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None ☒

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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**11. Closed financial accounts**

None  
☒

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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**12. Safe deposit boxes**

None  
☒

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None  
☒

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  
☒

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Sites**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME  
AND ADDRESS

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DATE OF  
NOTICE

ENVIRONMENTAL  
LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME  
AND ADDRESS

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DATE OF  
NOTICE

ENVIRONMENTAL  
LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

**18. Nature, location and name of business**

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

TAXPAYER  
I.D. NO. (EIN)

ADDRESS

NATURE OF BUSINESS BEGINNING AND  
ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME

ADDRESS

**[Questions 19 - 25 are not applicable to this case]**

\* \* \* \* \*

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 24 July 2007 Signature of Debtor /s/ Mark Thomas Matus  
MARK THOMAS MATUS

Date 24 July 2007 Signature of Joint Debtor /s/ Karen Lynn Matus  
KAREN LYNN MATUS

**CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110(c).)

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer Date

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. §156.*

0 continuation sheets attached

**Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571**

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

X  
Signature of Bankruptcy Petition Preparer or officer,  
principal, responsible person, or partner whose Social  
Security number is provided above.

Social Security number (If the bankruptcy petition  
preparer is not an individual, state the Social Security  
number of the officer, principal, responsible person, or partner of  
the bankruptcy petition preparer.) (Required  
by 11 U.S.C. § 110.)

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Mark Thomas Matus & Karen Lynn Matus

Printed Name(s) of Debtor(s)

Case No. (if known)

X/s/ Mark Thomas Matus 24 July 2007

Signature of Debtor Date

X/s/ Karen Lynn Matus 24 July 2007

Signature of Joint Debtor (if any) Date

AAMS  
o/b/o Centegra Health System  
PO Box 65576  
Des Moines, IA 50265

Allied Interstate  
o/b/o Sprint  
PO BOX 361477  
Columbus, OH 432136-4177

Americollect  
o/b/o Mercy Health Physicians  
814 S. 8th Street  
Manitowoc, WI 54220-4503

Anesthesia Associates of Woodstock  
641 E. Butterfield Road #907  
Lombard, IL 60148

Associated Collectors  
o/b/o Mercy Health System  
13 W. Milwaukee St. POB OX 1039  
Janesville, WI 53547-1039

Associated Recovery Systems  
o/b/o Sears  
PO Box 469099  
Escondido CA 92046-9099

At Credit Services, LLC  
o/b/o Mercy Assisted Care  
126 Second Street #106  
Hudson, WI 54016

Automated Accounts Mgmt  
o/b/o Centegra Health System  
4800 Mills Civil Parkway  
W. Des Moines, IA 50265-5263

Baker, Miller, Markoff & Krasny  
o/b/o Discover Financial  
29 N. Wacker Dr, 5th Floor  
Chicago, IL 60606-3221



Bank of America  
PO BOX 15726  
Wilmington DE 19886-5726

Bank of America/MBNA  
PO Box 17054  
Wilmington DE 19884

Capital Credit Service  
o/b/o Mariter Hospital  
2509 S. Stoughton Road  
Madison, WI 53716-0545

Capital Credit Services  
o/b/o Meriter Hospital  
PO Box 6250  
Madison, WI 53716

Cardmember Service  
Chase  
PO Box 50882  
Henderson NV 89016-0882

Cardmember Service Chase  
400 Brooks Edge Blvd.  
Westerville, OH 43801

Centegra Memorial Medical Center  
PO BOX 1990  
Woodstock, IL 60098-1990

Client Services  
o/b/o First USA  
3451 Harry Truman Blvd.  
St. Charles, IL 63301-4047

Credit Management Services  
o/b/o Mercy Assisted Care  
PO Box 931  
Brookfield, WI 53006-0931

Creditors Protection Service  
o/b/o Rockford Clinic  
202 W. State Street, Ste 300  
Rockford, IL 61101

Creditors Protection Service  
o/b/o Rockford Clinic  
202 W. State Street, Ste 300  
Rockford, IL 61101

Early Invervention  
PO Box 409168  
Chicago, Il 60640

First Financial Resources  
o/b/o Harris Bank  
1001 Worchester Road  
Farmington, MA 01703

First USA  
PO Box 15153  
Wilmington, DE 19886-5153

First USA  
PO Box 15153  
Wilmington, DE 19886-5153

Franks, Gerkin & McKenna  
o/b/o First USA Platinum  
PO Box 5  
Marengo, IL 60152

H&R Accounts  
o/b/o Centegra Memorial Medical Center  
7017 John Deere Parkway  
Moline, IL 61265

Harris Bank  
PO Box 5038  
Rolling Meadows, IL 60008

Harris Mortgage Loan  
PO Box 6148  
Carol Stream, IL 60197-6148

Lake/McHenry Pathology Associates  
520 E. 22nd Street  
Lombard, IL 60148

Leading Edge Recovery Solutions  
o/b/o Bank One  
5440 N. Cumberland Avenue Ste 300  
Chicago, IL 60656-1490

LTD Commodities, LLC  
o/b/o Household Bank  
PO Box 702  
Bannockburn, IL 60015-0702

LVNV FUnding, LLC  
o/b/o Sears  
PO Box 10497  
Greenville, SC 29603-0584

Mariter Hospital  
Drawer 915  
Milwaukee, WI 53270

MBNA America Platinum Plus  
PO Box 15287  
Wilmington, DE 19886-5019

Mercy Assisted Car  
1010 N. Washington Street  
Janesville, WI 53548

Mercy Assisted Car  
1010 N. Washington Street  
Janesville, WI 53548

Mercy Health System  
PO Box 5177  
Janesville, WI 53547-5177

MHS  
PO Box 5081  
Janesville, WI 53547

Moraine Emergency Physicians  
PO BOX 8759  
Philadelphia, PA 19101-8759

Moraine Emergency Physicians  
PO BOX 8759  
Philadelphia, PA 19101-8759

National Enterprise Systems  
o/b/o Sears Mastercard  
29125 Solon Road  
Solon, OH 44139-3442

NCO  
o/b/o Moraine Emer. Physic.  
PO BOX 8547  
Philadelphia, P A19101

North Shore Agency  
o/b/o Bottom Line Books  
PO Box 11067  
Des Moines, IA 50336

Northwest Imaging Associates  
641 E. Butterfield Road  
Lombard, IL 60148

OSI  
o/b/o Centegra Memorial Medical Center  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

OSI  
o/b/o Moraine ER Physicians  
1375 E. Woodfield Road, Ste 110  
Schaumburg, IL 60173-5447

OSI  
o/b/o Woodstock Imaging  
1375 E. Woodfield Drive  
Schaumburg, IL 60173

Park Dansan  
o/b/o Sprint  
113 W. Third Avenue  
Gastonia, NC 28053

Professional Accout Mgmt.  
o/b/o City of Crystal Lake  
PO BOX 397  
Milwaukee, WI 53201

Rockford Clinic  
2300 N. Rockton Avenue  
Rockford, IL 61103

Sallie Mae  
1002 Arthur Drive  
Lynn Haven, FL 32444-1683

Sears  
PO BOX 6189  
Sioux Falls, SD 57117

Sears Gold Mastercard  
PO Box 182156  
Columbus, OH 43218

State Collection Service  
o/b/o Mariter Hospital  
PO Box 6250  
Madison, WI 53716

State Collections  
o/b/o University of WI, Meriter Hospital  
& UW Medical Foundation  
2509 S. Stoughton Rd.  
Madison, WI 53716

The Center for Neurology  
750 E. Terra Cotta Avenue  
Suite A  
Crystal Lake, IL 60014

Unifund  
10625 Techwood Circle  
Cincinnati, OH 45242-2846

University of Wisconsin HCA  
600 Highland Avenue  
Madison, WI 53792

UW Health Physicians  
8007 Excelsior  
Madison, WI 53717

Valentine & Kebartas, Inc.  
o/b/o Chase aka Bank One  
PO Box 325  
Lawrence, MA 01842-0625

VW Health Physicians  
PO Box 2978  
Milwaukee WI 53201

Well Care Neonatologists  
PO Box 360  
South Elgin, IL 60177

Woodstock Imaging  
520 E. 22nd St.  
Lombard, IL 60148